

DIVIDEND REINVESTMENT PLAN REMOVAL FORM (DRIP)

Full name of Shareholder(s) in block capitals:	
Address:	
Company you hold shares in:	
Telephone Number:	Email Address:

To: The City Partnership (UK) Limited (the "Scheme Administrator")

I/We, the undersigned, confirm that I/we have read and understood the Terms and Conditions of the Dividend Reinvestment Plan, and that I/we wish to withdraw from the DRIP and for future dividends to be paid into a nominated bank account.

Bank:	
Account Name:	
Account Number:	
Sort Code:	

All shareholders named above must sign below:

Shareholder:	Shareholder:
Shareholder:	Shareholder:
Date:	

Please sign and return this form to The City Partnership (UK) Limited, The Mending Rooms, Park Valley Mills, Meltham Road, Huddersfield HD4 7BH. If your shares are held in more than one account, you must complete a separate Removal Form for each account. Please note that your completed Removal Form must be received by the Scheme Administrator no later than close of business on the last day for elections (typically 10 business days prior to a dividend payment date, but this may vary) to ensure that your withdrawal is processed in time for that particular dividend.